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SPECIALIZING IN  
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PATENT, TRADEMARK, COPYRIGHT,  
AND TECHNOLOGY RELATED CAUSES

**FACSIMILE COVER SHEET**

To: Mail Stop Application / GROUP 2142 / Examiner Thong H. VU

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From: Kurt L. VanVoorhies

Date: 24 January 2006

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Application No. : 10/025,316

Confirmation No. 8207

Applicant : Cora ALISUAG

Filed : 18 December 2001

TC/A.U. : 2142

Examiner : Thong H. VU

Title : COMPUTER ORIENTED RECORD ADMINISTRATION SYSTEM

Docket No. : COR-001-US

Customer No. : 26659

**Facsimile Contents:**

- |  |           |
|--|-----------|
| 1. Transmittal -   | 1 page ;  |
| 2. PTO-2038 Credit Card Payment Form in the amount of \$60 | 1 page ;  |
| 3. Reply Under 37 C.F.R. 1.111 -                           | 8 pages ; |
| Appendix -   | 2 pages ; |
| 4. Certificate of Mailing (on items 1 and 3).              |           |

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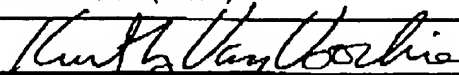
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<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/025,318
		Filing Date	18 December 2001
		First Named Inventor	Cora ALISUAG
		Art Unit	2142
		Examiner Name	Thong H. VU
		Attorney Docket Number	COR-001-US
Total Number of Pages in This Submission	12		

<b>ENCLOSURES (Check all that apply)</b>		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	Kurt L. VanVoorhies, Raggio & Dinnin, P.C.,	
Signature		
Date	24 January 2006	

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Typed or printed name	Kurt L. VanVoorhies (via FAX)	
Signature		Date 24 January 2006

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